

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 6
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee Majority Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016		
Mailing Address 135 Professional Dr Ste 104			Amount 300221.00		
City Ponte Vedra Beach	State FL	Zip Code 32082-6277	Transaction ID : EAD873E76C8ED466F990		
Purpose of Expenditure Direct Mail Costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Rep. Robert J. Dold Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought 750411.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Majority Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016		
Mailing Address 135 Professional Dr Ste 104			Amount 594729.00		
City Ponte Vedra Beach	State FL	Zip Code 32082-6277	Transaction ID : ECFE3279DF954AEFB5C		
Purpose of Expenditure Direct Mail Costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Joe Heck		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 1503924.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	894950.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael McGrew

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 30 / 2016

Signature

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NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Majority Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016		
Mailing Address 135 Professional Dr Ste 104			Amount 777041.00		
City Ponte Vedra Beach	State FL	Zip Code 32082-6277	Transaction ID : EA4FFD1A4E52C40C8824		
Purpose of Expenditure Direct Mail Costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Sen. Rob J. Portman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		974341.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Meath Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 29 / 2016		
Mailing Address 4441 Klinge St., NW			Amount 25000.00		
City Washington	State DC	Zip Code 20016-3578	Transaction ID : ED4C5F49020E944EBBF0		
Purpose of Expenditure Online video production costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Rep. Erik Paulsen		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought		26907.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	802041.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Meath Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2016		
Mailing Address 4441 Klinge St., NW			Amount 25000.00		
City Washington	State DC	Zip Code 20016-3578	Transaction ID : E9C91334F3A5946DE8BF		
Purpose of Expenditure Online video production costs		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Rep. Mike Coffman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought		349601.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Meath Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2016		
Mailing Address 4441 Klinge St., NW			Amount 25000.00		
City Washington	State DC	Zip Code 20016-3578	Transaction ID : E8A1E4952FC87462E81E		
Purpose of Expenditure Online video production costs		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Sen. Roy D. Blunt		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate		District: _____ State: MO
Calendar Year-To-Date Per Election for Office Sought		26907.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 430 N Michigan Ave			Amount 735.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EADE3036F296C4ED2818	
Purpose of Expenditure Consulting Services		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Sen. Rob J. Portman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought		974341.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee National Association of REALTORS			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 430 N Michigan Ave			Amount 735.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E03D572B8A2D248E0844	
Purpose of Expenditure Consulting Services		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Joe Heck		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		1503924.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1470.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 430 N Michigan Ave		Amount 735.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E60D470AB5BD24A57893 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services	Category/Type		
Name of Federal Candidate Rep. Robert J. Dold Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 10 State: IL
Calendar Year-To-Date Per Election for Office Sought		750411.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 29 / 2016	
Mailing Address 430 N Michigan Ave		Amount 105.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EEA7DA418E1F549BB876 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services	Category/Type		
Name of Federal Candidate Rep. Erik Paulsen		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: MN
Calendar Year-To-Date Per Election for Office Sought		26907.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	840.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 430 N Michigan Ave		Amount 105.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E68769C4154664D30A1C Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services	Category/Type		
Name of Federal Candidate Rep. Mike Coffman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought		349601.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2016	
Mailing Address 430 N Michigan Ave		Amount 105.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E648D39C501C84FFB856 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services	Category/Type		
Name of Federal Candidate Sen. Roy D. Blunt		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: MO
Calendar Year-To-Date Per Election for Office Sought		26907.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	210.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	1749511.00

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